

# Andrea Harris Social, Economic, Environmental and Health Equity Task Force Meeting Minutes

# Wednesday, October 7, 2020 10:00 a.m. Virtual Microsoft Teams Meeting

A regular meeting of the members (the "Members") of the Andrea Harris Social, Economic, Environmental and Health Equity Task Force (the "Task Force") was held remotely on Wednesday, October 7, 2020 at 10:00 a.m. Eastern time via a virtual Microsoft Teams meeting.

# **Leadership Present**

Secretary Machelle Sanders (Chair)

### **Members Present**

(Unless otherwise noted below, all members joined the videoconference at the opening of the meeting at approximately 10:06 a.m. and all members exited the videoconference by approximately 12:21 p.m. when the meeting was closed.)

Jonathan Augustine Pat Martinez

Walter Baucom Dr. Viviana Martinez-Bianchi

Cedric Bright Stephanie McGarrah (Designee – Dwight

Dr. Lenora Campbell Anderson)

Dr. Christy Clayton Deputy Secretary Benjamin Money

Dr. Giselle Corbie-Smith

Juvencio Rocha Peralta

Charlene Green Kevin J. Price

Andres Henao Trey Rabon

Dale Jenkins Secretary Michael S. Regan James H. Johnson Jr. Sonyia Richardson

C.C. Lamberth
Yazmin Garcia Rico
Rep. Donny Lambeth
Dr. Carlos Rish

Quinny Sanchez Lopez Dr. Catherine Harvey Sevier

Dr. John Lumpkin

Anthony Spearman

Margaret Weller-Stargell Gene Woods Annette Taylor Cornell Wright

**Members Absent** 

Lynn BottoneRep. Yvonne HolleyRhett BrownGregory Richardson

Adriana Chavela

# **Others Present**

Representative Eva Clayton, Former NC Congresswoman, United States House of Representatives Dr. Shannon Dowler, Chief Medical Officer, NC Medicaid, Division of Health Benefits, NC DHHS Lakeisha Moore, Health Information Technology Program Manager, Office of Rural Health, NC DHHS Jeremy Collins, Director for Innovative Connectivity for Hometown Strong

Tammie Hall (Staff Liaison to Economic Opportunity & Business Development Subcommittee)
Guadalupe Jimenez (Staff Liaison to Environmental Justice and Inclusion Subcommittee)
Sa'Metria Jones (Staff Liaison to Educational Opportunity Subcommittee)
Catherine Rivera (Staff Liaison to Patient Engagement Subcommittee)
Emily Roach (Staff Liaison to Access to Healthcare Subcommittee)
Justin Truesdale (Secretary)

# Call to Order

Secretary Machelle Sanders, Chair of the Task Force, called the meeting to order at approximately 10:06 a.m. Eastern time and welcomed all in attendance. Secretary Sanders thanked everyone for joining and all their work to date.

### **Roll Call and Ethics Statement**

Catherine Rivera, Boards and Commissions Coordinator, NC Department of Administration, asked for a roll call and indicated a quorum was present.

Ms. Rivera also read the Ethics Statement to the Task Force.

#### Welcome

Secretary Sanders, again thanked everyone for joining the meeting, and reminded everyone that it is Hispanic Heritage Month, which was federally established by President Reagan. Each year, Governor Cooper issues a proclamation, in accordance with the dates established federally, proclaiming September 15<sup>th</sup> through October 15<sup>th</sup> as "Hispanic Heritage Month."

Secretary Sanders encouraged everyone to read the proclamation if they have not done so already. Secretary Sanders noted that Hispanic Heritage Month is a time to celebrate the contributions and influence of Hispanic people and communities to the history, culture, and achievements of the United States. However, although this is a time for celebration, Secretary Sanders took a moment to reflect on the 48,441 Hispanic individuals in North Carolina that have been infected with COVID-19, and the 297 Hispanic individuals whose lives were lost. Secretary Sanders asked everyone to take a moment of silence.

Secretary Sanders also invited everyone to attend the Department of Administrations' Hispanic Heritage Month Panel on October 8, 2020 featuring Pat Martinez & Catherine Rivera.

### Remarks

Secretary Sanders introduced Former Representative Eva Clayton and noted some of her background, including her work over decades of helping to uplift all citizens of North Carolina.

Ms. Clayton, thanked everyone for taking the challenge and responding to the call of the Governor and the needs of the state and our nation. Ms. Clayton noted that COVID-19 impacts everyone and does not discriminate, however, its impact is disproportionately placed on minority communities.

Ms. Clayton noted that the fact that certain communities are suffering more due to COVID-19 is evidence of systemic racism. These communities don't receive the same health care and resources that allow other communities to better bear the impact of the virus. Ms. Clayton noted that if we are to grow and prosper as a state and nation, we must be committed to addressing the health, economic, environmental and quality of life for all citizens.

Ms. Clayton reminded everyone that this election is as important as the virus. We must all vote because our lives and democracy depends upon it. Ms. Clayton thanked everyone for their continued work and support and for seeing the report to the Governor through to action.

Secretary Sanders thanked Ms. Clayton for her remarks and highlighted the importance of not just creating the report, but also taking the actions necessary to improve the lives of all the citizens of our state.

### **Vote by Roll Call**

Secretary Sanders asked for a motion to approve the minutes from the previous meeting. Pat Martinez so moved, and the motion was seconded by Greg Richardson. Ms. Rivera noted that the meeting minutes have been approved.

#### Presentations Regarding Medicaid, Telehealth, and Broadband

Secretary Sanders introduced Dr. Shannon Dowler, Chief Medical Officer, NC Medicaid, Division of Health Benefits, NC DHHS, Lakeisha Moore, Health Information Technology Program Manager, Office of Rural Health, NC DHHS and Jeremy Collins, Director for Innovative Connectivity for Hometown Strong.

Dr. Dowler noted that upon the onset of the COVID-19 pandemic, there was a big drop in Medicaid claims, and then shortly thereafter, telehealth utilization increased among claims. Dr. Dowler noted that the utilization of telehealth services among White and Black individuals was very similar, while Asian and Native American usage was slightly lower. However, the Hispanic population has used telehealth/telephonic healthcare resources less than non-Hispanic populations. When analyzing age groups, people aged 46-64 were highest utilizers, however, the 65+ age range was low, but that is impacted some due to most in that age group moving on to Medicare. In terms of gender, men were slightly more likely to use telehealth than women

Dr. Dowler also indicated that where communities have less access to broadband, as expected, there is lower utilization of telehealth. Dr. Dowler noted that there were some interesting things done to overcome barriers, like family or friends allowing others to use their devices or networks and healthcare providers opening their network access to parking lots to allow for telehealth visits.

Rep. Donny Lambeth noted that he was looking forward to supporting legislation to encourage broadband expansion in rural areas.

Dr. Giselle Corbie-Smith highlighted that we must focus on limits of access and affordability as we think about extending broadband across North Carolina.

Dr. Rhett Brown asked if telehealth coverage would continue at parity. Dr. Dowler noted that telehealth will be at parity, telephone visits will not, but hopes that other payers will follow-suit.

Ms. Lakeisha Moore noted that through telehealth, we are able to get psychiatrist access in hours to rural patients who need it, rather than days. Ms. Moore noted that the driver to the increase in use of telehealth was previously providers' chief technology officers, but COVID-19 forced people to expedite its use. Ms. Moore noted that the NC DHHS is seeking a grant from the Appalachian Regional Commission to focus on digital literacy training in the Western part of North Carolina (Mitchell, Madison and Macon counties).

Dr. Giselle Corbie-Smith asked about opportunities for public/private partnerships as we think about broadband expansion, telehealth and gaps that we are facing. Ms. Moore noted that in the grant application that they asked for a public/private partnership to help with broadband expansion. Ms. Moore stated that in rural locations where there is good broadband access there is still low broadband utilization, so it implies that those populations don't see the value in the broadband services. Ms. Moore indicated they would like to have partnerships to help ensure that broadband is actually available and affordable in rural areas.

Dr. Christy Clayton asked if there would be a broadband feasibility study for the rest of the state. Ms. Moore noted that the ARC study is focused on the Western part of the State, however, they intend to expand the items learned in this study to the rest of North Carolina.

Jeremy Collins gave an overview of the Governor's initiative called NC at High Speed. Mr. Collins noted that the digital divide, where some have access to faster download and upload speeds, increases the disparity in access to healthcare. The goal of NC at High Speed is to provide access and affordability to high speed internet to everyone in North Carolina. Adoption, access and availability means that households would have the ability to simultaneously have a telehealth appointment while their children are doing their school work.

Pat Martinez noted that we should not forget the urban digital divide. For example one side of Charlotte is struggling with access and educating students due to the cost of broadband for those households. Mr. Collins noted that the current approach of locating where broadband currently exists and building out from there results in the most marginalized communities getting access to broadband last, so the approach should be to go to the marginalized locations and build out from there so that they get access now.

Dr. Bright noted that understanding that the digital divide adds to the educational divide, what measures can we suggest to close the gap as we move forward? In addition, how do we accelerate the learning platforms for those disproportionately impacted? Mr. Collins indicated that they are asking providers to remove data caps in certain communities to ensure access is not arbitrarily limited. Mr. Collins highlighted that to eliminate the digital divide it is important to remove data caps and work with educational institutions to ensure that the digital divide is not the determinant of success. Mr. Collins also noted that the healthcare providers need to work together and lean in to close the digital divide and increase access to high speed internet.

#### **Subcommittee Reports**

Secretary Sanders asked for subcommittee reports and updates.

#### Access to Healthcare Subcommittee

Dr. Giselle Corbie Smith, the chair of the Access to Healthcare subcommittee, noted that the subcommittee's short-term goal is centered around telemedicine and broadband access. The subcommittee's action item prior to this meeting was to research the percentage of population with insurance coverage for telehealth services and broadband adoption rates to ensure the subcommittee's goals were measurable against data points. The subcommittee has a list of policy recommendations, ranging from expansion of telepsychology, expansion of telemedicine services to cover telephonic services when televideo is not feasible and increasing healthcare interpreters for those with limited English proficiency or that are deaf or hard of hearing. With regards to the barriers and resources needed, the subcommittee noted that it will need to determine funding for expansion of broadband and access to hardware to utilize broadband. Next steps are to meet with Jeremy Collins from Hometown Strong to determine ways to work together with existing broadband expansion initiatives.

The subcommittee's additional short-term goals were related to Medical Homes and equitable vaccine allocation, including trust regarding vaccines.

Regarding vaccine allocation, the subcommittee wants to identify and align the subcommittee's work with state-wide efforts.

Dr. Clayton noted that she previously circulated an article indicating that Black physicians want to vet our vaccines given the distrust of vaccines within certain communities. Dr. Clayton noted that as we approach the vaccine it becomes very important to gain the trust in our minority communities by reaching out to healthcare providers in those communities.

Dr. Bright noted that the concern in medical associations around the vaccine includes trust, but also extends to concerns regarding certain guidelines, that may have the impact of unintended coercion that causes people of color to disproportionately have to get the vaccine to continue in their jobs as essential workers.

Dr. Green also noted that experts are getting together to find protocols on vetting the vaccines. There is an opportunity for NC to be a leader in this work.

Dr. Catherine Harvey Sevier stated that over the last month there have been a series of three meetings by the NC Institute of Medicine and DHHS regarding the issue of vaccines and they are finishing up a priority recommendation for who gets the vaccines and in what order. They are working from a model of scarcity and how to prioritize the delivery of the vaccine. The last part of the meeting was focused on the important of communication and reaching into communities that look like you to talk about the risks and benefits of vaccines to increase trust. Dr. Sevier encouraged coordination among the subcommittee and these groups.

### Patient Engagement Subcommittee

Cornell Wright asked Catherine Rivera to provide an update. The subcommittee is developing a survey to send out to health care agencies across the state to determine current cultural competency, then develop training. The questions have been developed and are awaiting feedback from subcommittee members.

Secretary Sanders asked if the goal is to survey the entire state, and if so, by when would the survey go out and when would implementation of training happen. Ms. Rivera noted that the goal is to get the survey our in November to 50% of health agencies, with the implementation of training being a long term.

Dr. Gene Woods noted that the NC Hospital Association is also doing some of this work, so there is some ability to partner to speed up the effort.

Dr. Lenora Campbell requested that the surveys should cover all healthcare agencies, not just educational institutions. Cornell Wright noted that the goal is to cover medical schools, nursing schools and other health agencies.

Dr. Bright noted that once we collect information, we will identify best practices to model and use that as a means to roll out recommendations in the future.

Secretary Sanders noted that actions items are to make a connection with the NC Hospital Association to align with the work that is being done and to make sure the subcommittee is expanding the survey and implementation to encompass health agencies beyond schools.

Dr. Clayton stated that the subcommittee should keep in mind that it is important to attract diverse healthcare providers to rural areas and make it attractive for them to stay there.

# Economic Opportunity and Business Development

Trey Rabon noted that their highlighted short term goal is to support workforce development programs for construction trades in the public and private sector. The subcommittee's current work is inventorying participation in historically underutilized business opportunities, and reviewing opportunities for executive education and development with local universities and established businesses.

Secretary Sanders asked if the subcommittee discussed other areas, specifically STEM, where there is a gap and not a great representation of people of color. Secretary Sanders noted that those jobs tend to be higher paying and sustain through economic downturns. Mr. Rabon noted that there is a focus on construction trade, however, STEM is a part of that effort. The subcommittee is looking for opportunities to increase procurement in all areas, and while the subcommittee has not specifically discussed life sciences, it will consider that going forward.

## **Educational Opportunity**

Pat Martinez noted that the subcommittee's short term goal is to host the public virtual roundtables to identify disparities in education and the impact of COVID-19. The first virtual roundtable is scheduled for October 27, where there will be a panel discussion regarding healthcare, finance and education. The five panelists will be announced later this week. The second half of the event will involve public comments or questions for the panelists. The subcommittee is inviting experts from the communities to be part of the public comment sections.

One barrier is time, but the subcommittee is managing this. The next step is to promote the roundtable. Ms. Martinez thanked those helping with the subcommittee's work. The feedback from the roundtables will be used to help develop the recommendations.

#### Environmental Justice and Inclusion

Secretary Michael Regan noted that the subcommittee received a lot of good feedback from the public listening session. The short-term goal of evaluating the feasibility and/or designation of a permanent full-time position on Environmental Justice, Equity and Inclusion in the Department of Commerce, Department of Transportation, Department of Natural and Cultural Resources, and at the office of Emergency Management. The departments are supportive of this goal and are onboard with getting funding for these positions or designating these responsibilities to an existing senior leadership position. The subcommittee will continue to work on refining these positions, the metrics and performance goals within these departments.

Pat Martinez requested that we get a timeline regarding an update on when things will be happening, such as roundtables or the delivery of the surveys. Secretary Sanders noted that the implementation plans will have this information and should be updated.

# **Business Engagement Group**

Justin Truesdale, Secretary of the Task Force reported that Secretary Sanders asked that we form a Business Engagement Group for the purpose of developing public-private partnerships to move forward the goals of the Task Force and to potentially pilot some of the recommendations. Mr. Truesdale noted that the Business Engagement Group is at the stage of finalizing the group's membership and currently has representation from AT&T, Curi, Duke Energy, MetLife, Pfizer and PNC Bank.

The Business Engagement Group's initial goals are to have two initial topics or questions that are considered, then the group can move on to others in due course to continue to help move the goals of the Task Force forward. Also, given the business nature of the group, the group's topics line up with the Economic Opportunity and Business Development subcommittee's goals.

The first question the group will consider is what are businesses in the private sector doing to address business diversity and inclusion initiatives, including through procurement of goods and services for their own businesses, as well as in hiring, and how can the group encourage other businesses to adopt these best practices. The second question is which workforce development efforts are most beneficial to the private sector, and which workforce development efforts should the group support and encourage for increased use.

The group will aim to collect information on these two topics and identify action items that can help get best practices information on engagement of underrepresented businesses out to other NC businesses and help promote the workforce development efforts that are working best.

Pat Martinez noted that as we talk about economics and businesses, we need to recognize that some businesses are not following current guidelines. We need to consider what we do for enforcement. Ben Money noted that DHHS is having very active conversations with the Governor regarding enforcement and available options, because we need compliance to get through this pandemic.

## **Closing Remarks**

Research Triangle Institute reached out and wanted to know how they could help the Task Force. They will be looking over the Task Force's goals and implementation plans to help with determining and drafting policy recommendations.

Secretary Sanders reminded everyone that subcommittee reports need to be ready by November 6, 2020, so that the Task Force can be working on the sections of the annual report to the Governor.

Secretary Sanders also reminded everyone that the November 4 and November 18 meetings have been switched. November 4 will be the subcommittee meeting date and November 18 will be the full Task Force meeting date.

Secretary Sanders again thanked the Task Force Members for their participation and passion for the work of the Task Force. Secretary Sanders also reminded everyone to vote, to complete the Census and of the three W's (wear a face covering, wait six feet apart and wash your hands).

There being no further business, the meeting adjourned at approximately 12:21 p.m. Eastern time.